

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK
ELECTRONIC CASE FILING SYSTEM
ATTORNEY PASSWORD APPLICATION**

LIVE SYSTEM

I, _____, swear or affirm that I am a member of the bar in good standing of the State of _____. By submitting this application and receiving a password, I agree to adhere to the court's order authorizing electronic case filing, any supplements and/or amendments thereto and the rules promulgated for the court's ELECTRONIC CASE FILING SYSTEM. I am providing the following information as a condition of receiving my password:

Social Security # _____ - _____ - _____ Bar ID # _____

Firm: Name: _____ Federal ID# _____

Address: _____

Phone # _____ FAX #: _____

Internet E-Mail Address for Service: _____

I have read and understand the following rules:

1. I will employ the Electronic Case Filing System for cases filed in the United States Bankruptcy Court for the Southern District of New York.
2. I will meet all hardware and software requirements promulgated by the court for system use. I understand that the current minimum requirements for filing documents are: a personal computer running a standard platform (Windows NT, Windows 95, Macintosh), an Internet provider, Netscape Navigator 3.0 or higher, Adobe Acrobat Exchange 3.01 or higher (to convert wordprocessor format documents to portable document format (PDF) and a document scanner.
3. Each use of my password for filing documents will meet the requirements of Fed. R. Civ. P. 11, Fed. R. Bankr. P. 9011 and Local Bankruptcy Rule 9011-1. I understand that the use of my password constitutes my signature on the document being submitted. If I submit a document for another party, I understand it is my responsibility to maintain a copy of that document bearing the signer's signature in my records.
4. Inasmuch as the combination of my identification with my password constitutes my signature, I agree to protect and secure the confidentiality of my password. Therefore, if I have reason to believe that my password has been compromised, it is my responsibility to immediately notify the court in writing. Moreover, it is also my responsibility to immediately inform the court of any change in my firm affiliation,

address, telephone, fax or E-mail addresses.

5. I understand that the issuance of a password to me constitutes a waiver of conventional service pursuant to the court's electronic case filing general order No. 182. I agree to accept a Notice of Electronic Filing by hand, facsimile, first class mail or authorized e-mail in lieu of conventional service. Moreover, I will endeavor to use the automatic E-mail notification feature of the Electronic Case Filing System wherever feasible.
6. Notwithstanding No. 5 herein, in cases wherein service of documents filed electronically is required to be made on the United States and its agencies, corporations or officers, full compliance with Rules 2002(j) and 7004(b)(4), (5) and (6) of the Federal Rules of Bankruptcy Procedure and Rule 4(l) and (j) of the Federal Rules of Civil Procedure is required.
7. In compliance with the First Amendment to General Order No. 182 Re: Electronic Case Filing Procedures, I understand that if documents being submitted electronically have lengthy exhibits, the filing of relevant excerpts of the exhibits is preferred and permitted without prejudice to my right to file additional excerpts or the complete exhibit with the court at any time.

Date: _____

Attorney Applicant Signature

Sworn to or affirmed before me this ____ day of _____, ____.

Notary Public in and for the
State of _____
County of _____

Please return to: MIS Department
Attn. Electronic Case Filing System Registration
United States Bankruptcy Court
Southern District of New York
One Bowling Green
New York, New York 10004-1408

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK
ELECTRONIC CASE FILING *TEST* SYSTEM
ATTORNEY/PARTICIPANT REGISTRATION FORM**

TEST CASES ONLY

This form shall be used to register for an account on the Court's Electronic Filing System . Registered attorneys and other participants will have privileges both to electronically submit documents, and to view and retrieve electronic docket sheets and documents for all test cases assigned to the Electronic Filing System. The following information is required for registration:

First Name: _____

Middle Name: _____

Last Name: _____

Bar ID # (if applicable): _____

Firm Name: _____

Firm Address: _____

Voice Phone Number: _____

Fax Phone Number: _____

Internet E-Mail Address: _____

By submitting this registration form, the undersigned agrees to abide by the following rules:

1) This system is for use only in U.S. Bankruptcy cases permitted by the U.S. Bankruptcy Court for the Southern District of New York. It may be used to file and view electronic documents, docket sheets, and notices.

2) Documents are to be submitted electronically only in Portable Document Format (PDF).

3) The combination of the user identification and password issued by the court will serve as the signature of the attorney/participant filing the document. Individuals must protect the security of their passwords and immediately notify the court if they learn that their password has been compromised.

Please return to :

MIS Department, Att: Electronic Filing Registration
U. S. Bankruptcy Court
Southern District of New York
One Bowling Green
New York, NY 10004

Applicant Signature: _____ Date: _____